

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

| | |
|---|---|
| PLAINTIFF Brian Perron (#167203) | COURT CASE NUMBER 08-C-2757 <i>08cv2757</i> |
| DEFENDANT County of Dupage, etal. | TYPE OF PROCESS Summons and Complaint |

SERVE **AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
Chief Lavery - DuPage County Sheriff's Office

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
Dupage County Sheriffs Office C/O CIVIL DIVISION 501 NORTH

| | | |
|--|---|----------|
| SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: Brian Perron - #167203 Dupage County Jail - (DCJ) P.O. Box 957 Wheaton, IL 60187 | Number of process to be served with this Form - 285 | 1 |
| | Number of parties to be served in this case | 3 |
| | Check for service on U.S.A. | X |

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
County Farm Road, Wheaton, IL 60187

Plaintiff stated in the complaint on page 2, this defendant is retired.

Administration Phone # (630) 682-7269
Civil Division Phone # (630) 682-7250**FILED**
JUL 14, 2008
JUL 14 2008 Y M

| | | |
|---|-----------------------------------|--------------------------------|
| Signature of Attorney or other Originator requesting service on behalf of: XXXXXX | TELEPHONE NUMBER XXXXXX | DATE JUL 14 2008 Y M |
| <input type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT | MICHAEL W. DOBBINS | |

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

| | | | | | |
|---|------------------------------|-------------------------------------|------------------------------------|--|------|
| I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted) | Total Process 3083 | District of Origin No. 24 | District to Serve No. 24 | Signature of Authorized USMS Deputy or Clerk | Date |
|---|------------------------------|-------------------------------------|------------------------------------|--|------|

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

| | |
|--|---|
| Name and title of individual served (if not shown above) | <input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode. |
| Address (complete only if different than shown above) UNCLASSED SEATED LOCATION | Date of Service 7/1/08 |
| | Time 6:00 am |
| | Signature of U.S. Marshal or Deputy J. W. M. |

| | | | | | | |
|-----------------------------|---|----------------------------|--------------------------------|------------------------------|---|------------------------------|
| Service Fee 96.00 | Total Mileage Charges (including endeavors) 38.00 | Forwarding Fee 0 | Total Charges 134.80 | Advance Deposits 0 | Amount owed to U.S. Marshal or 134.80 | Amount of Refund 0 |
|-----------------------------|---|----------------------------|--------------------------------|------------------------------|---|------------------------------|

REMARKS: **505 - civil division**
1 DUSM
2 HOURS
50 MILES RT